

Signature

Please type a plus sign (+) inside this box -> PTO/SB/21 (08-00) Approved for use through 10/31/2002 OMB 0651-0031
U.S Patent and Trademark Office U.S DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number Application Number **TRANSMITTAL Filing Date FORM** First Named Inventor E. RAY CARTER Group Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Total Number of Pages in This Submission 38 Attorney Docket Number 2025 **ENCLOSURES** (check all that apply) Assignment Papers (for an Application) After Allowance Communication Fee Transmittal Form X to Group The state of the s Appeal Communication to Board X Fee Attached X Drawing(s) of Appeals and Interferences Appeal Communication to Group Licensing-related Papers Amendment / Reply (Appeal Notice, Brief, Reply Brief) Petition After Final Proprietary Information Petition to Convert to a Affidavits/declaration(s) Provisional Application Status Letter Power of Attorney, Revocation Change of Correspondence Address The Hills and X Other Enclosure(s) (please Extension of Time Request identify below): Terminal Disclaimer **Express Abandonment Request** jan is Request for Refund Information Disclosure Statement CD, Number of CD(s)_ Certified Copy of Priority Document(s) Remarks Response to Missing Parts/ Incomplete Application Response to Missing Parts 4 under 37 CFR 1.52 or 1 53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Individual name GORDON SHIELDS Signature Date 7-11-2001 CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date. Typed or printed name

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

Date

Approved for use through 10/31/2002 OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
o a collection of information unless it displays a valid OMB control number Under the Paperwork Reduction Act of 1995, no persons are required to r

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Signature

H. GORDON SHIELDS

(\$) 499.0	0
------------	---

Complete if Known				
Application Number				
Filing Date				
First Named Inventor	E. RAY CARTER			
Examiner Name				
Group Art Unit				
Attorney Docket No	2025			

METHOD OF PAYMENT	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated foce and credit any overnayments to	3. ADDITIONAL FEES			
indicated fees and credit any overpayments to Deposit	Large Small			
Account	Entity Entity Fee Fee Fee Fee Fee Fee Description	ee Paid		
Number Deposit	Code (\$) Code (\$)	1		
Account	105 130 205 65 Surcharge - late filing fee or oath			
Name Charge Any Additional Fee Required	127 50 227 25 Surcharge - late provisional filing fee or cover sheet			
Under 37 CFR 1 16 and 1 17	139 130 139 130 Non-English specification			
Applicant claims small entity status See 37 CFR 1 27	147 2,520 147 2,520 For filing a request for ex parte reexamination			
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to			
X Check Credit card Money Other	Examiner action	.uv		
FEE CALCULATION	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action			
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month			
Large Entity Small Entity	116 390 216 195 Extension for reply within second month			
Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month			
Code (4)	118 1,390 218 695 Extension for reply within fourth month			
101 710 201 355 Utility filing fee 106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month			
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal			
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal			
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing			
	138 1,510 138 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$)355.00	140 110 240 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional			
Fee from Extra Claims below Fee Paid				
Total Claims 36 -20** = 16 x 9.00 = 144.00				
Independent Claims X = X	144 600 244 300 Plant issue fee			
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner			
	123 50 123 50 Processing fee under 37 CFR 1 17(q)			
Large Entity Small Entity	126 180 126 180 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Fee Description Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	581 40 581 40 Recording each patent assignment per property (times number of properties)			
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection			
104 270 204 135 Multiple dependent claim, if not paid	(37 ČFR § 1 129(a))			
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1 129(b))			
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)			
and over original patent	169 900 169 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$)144.00	Other fee (specify)			
**or number previously paid, if greater, For Reissues, see above *Reduced by Basic Filing Fee Paid *SUBTOTAL (3) (\$)				
Complete (if applicable)				
SUBMITTED BY	Соттртеле (п аррисавте)			

7-11-2001 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Registration No

(Attorney/Agent)

23,099

Telephone

(602)

995-0490

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: E. RAY CARTER

FOR: SPRAY CAN MIXER APPARATUS

Commissioner of Patents and Trademarks

Washington, D.C. 20231

Sir:

CERTIFICATE OF MAILING BY EXPRESS MAIL

The undersigned certifies that the attached PATENT APPLICATION is being placed in an envelope and mailed by Express Mail (Post Office to Addressee) to the Commissioner of Patents and Trademarks, Washington, D.C. 20231 on July 11, 2001. The PATENT APPLICATION has the Express Mail Label identification No. TB 623753218US thereon.

H. Gordon Shields Regis. 23,099

HGS:jag Phoenix, Arizona (602) 995-0490